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**APPLICANTS**

Jozef J.G. Bosch, Amsterdam, NETHERLANDS;  
 Paulus Spaanderman, Leiden, NETHERLANDS;  
 Jens K. Poulsen, Hedehusene, DENMARK;  
 Mohammad Shajaan, Valby, DENMARK;

**\*\* CONTINUING DATA \*\*\*\*\***

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NETHERLANDS	SHEETS DRAWING 15	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

70001

**TITLE**

DIGITAL SYSTEM BUS FOR USE IN LOW POWER INSTRUMENTS SUCH AS HEARING AIDS AND LISTENING DEVICES

FILING FEE RECEIVED 1522	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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